



2018 surveillance of physical activity in the workplace (NICE guideline PH13)

Surveillance report

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Surveillance decision

We will not update the guideline on physical activity in the workplace.

Reasons for the decision

The majority of new evidence was found to be broadly consistent with the current recommendations. We found some new evidence on the specific components of physical activity programmes which are not currently included in the guideline, however, more evidence on the long-term effects of these are needed before an impact on the guideline can be assessed. Ongoing trials assessing the long-term effectiveness of sit-stand desks are being monitored and will be reviewed for impact on the guideline once the results are published.

For further details and a summary of all evidence identified in surveillance, see [appendix A](#).

Overview of 2018 surveillance methods

NICE's surveillance team checked whether recommendations in [physical activity in the workplace](#) (NICE guideline PH13) remain up to date.

The surveillance process consisted of:

- initial feedback from topic experts via a questionnaire
- input from voluntary and community sector organisations and stakeholders on known variations in practice and policy priorities
- literature searches to identify relevant evidence
- assessing the new evidence against current recommendations and deciding whether or not to update sections of the guideline, or the whole guideline
- consulting on the decision with stakeholders and considering comments received during consultation.

For further details about the process and the possible update decisions that are available, see [ensuring that published guidelines are current and accurate](#) in developing NICE guidelines: the manual.

Evidence considered in surveillance

Search and selection strategy

We searched for new evidence related to the whole guideline.

We found 20 studies in a search for randomised controlled trials and systematic reviews published between 1 August 2014 and 15 February 2018.

See [appendix A](#): summary of evidence from surveillance for details of all evidence considered, and references.

Selecting relevant studies

During the original guideline development, studies from the US and Asia were excluded because of time constraints. Studies were included if they were implemented in the UK, the rest of Europe, Australia, New Zealand and Canada. During surveillance, we included studies from all countries because this was the original intention during guideline development. With the exception of this change, the inclusion and exclusion criteria from the original guideline were applied during study selection.

Ongoing research

We checked for relevant ongoing research: 4 studies were assessed as having the potential to change recommendations. Therefore we plan to regularly check whether these studies have published results, and evaluate the impact of the results on current recommendations as quickly as possible. These studies are:

- [The effectiveness and cost-effectiveness of an employer-led intervention to increase walking during the daily commute: a cluster randomised controlled trial](#)
- [Effectiveness of a behaviour-change intervention with sit-stand desks on NHS desk-based staff's sitting time and associated factors \(SMaRT Work\): a cluster randomised controlled trial](#)
- [Effectiveness and cost-effectiveness of a Physical Activity Loyalty scheme to maintain behaviour change: a cluster randomised controlled trial](#)
- [A cluster randomised controlled trial to investigate the effectiveness and cost-effectiveness of a Structured Health Intervention For Truckers \(The SHIFT Study\).](#)

Intelligence gathered during surveillance

Views of topic experts

We sent questionnaires to 14 topic experts and received 6 responses. The topic experts participated in the guideline committee who developed the guideline.

Four of the topic experts felt that the guideline is in need of an update, whereas 2 felt that an update was not needed. The main areas that they highlighted for update included new

workplace interventions to tackle sedentary behaviour and a need to make the guideline more intervention-focused.

See [appendix A](#): summary of evidence from surveillance for details of how these concerns have been addressed.

Views of voluntary and community sector organisations

For this surveillance review, 1 voluntary and community sector organisation completed a questionnaire about developments in evidence, policy and services related to the guideline. Feedback from the questionnaire indicated that they felt the guideline should be updated to include more consideration of behavioural mechanisms to increase physical activity in the workplace, such as the use of workplace champions.

See [appendix A](#): summary of evidence from surveillance for details of how this concern has been addressed.

Views of stakeholders

Stakeholders are consulted on all surveillance decisions except if the whole guideline will be updated and replaced. Because this surveillance decision was to not update the guideline, we consulted on the decision.

Overall, 2 stakeholders commented. Both stakeholders agreed with the decision to not update the guideline and provided no further comments.

See [appendix B](#) for full details of stakeholders' comments and our responses.

See [ensuring that published guidelines are current and accurate](#) in developing NICE guidelines: the manual for more details on our consultation processes.

Equalities

No equalities issues were identified during the surveillance process.

Editorial amendments

During surveillance of the guideline we identified the following points in the guideline that

should be amended.

There is a cross referral in recommendation 3 to NICE guideline PH8 which needs correcting. This guideline has been updated and replaced by NICE guideline NG90 ([physical activity and the environment](#)).

Overall decision

After considering all evidence and other intelligence and the impact on current recommendations, we decided that no update is necessary.

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